



## DECLARATION FOR PATENT APPLICATION

Attorney Docket:  
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I/we hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

Application Number(s)

Filing Date

We hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Petra TAFELMEYER

Inventor's Signature Tafelmeier Date: 5-31-06

Residence: Fondation de Monaco, Chambre 64, 47 a, Boulevard Jourdan, F-75014 Paris, France

Country of Citizenship: Germany

Post Office Address: same as above

Full name of second inventor: Kai JOHNSON

Inventor's Signature Kai Date: 5-15-06

Residence: Rue du Midi 20, CH-1003 Lausanne, Switzerland

Country of Citizenship: Germany

Post Office Address: same as above

Full name of third inventor:

Inventor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of fourth inventor:

Inventor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of fifth inventor:

Inventor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Full name of sixth inventor:

Inventor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Residence: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Post Office Address: \_\_\_\_\_